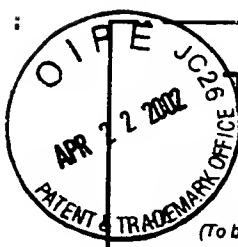


2181



TRANSMITTAL FORM

(To be used for all correspondence after initial filing)

COPY OF PAPERS
ORIGINALLY FILED

Total Number of Pages in this Submission: 5	Attorney Docket No.	SUN-P5494-MDF
---	---------------------	---------------

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee attached <i>2 M</i>	<input checked="" type="checkbox"/> Assignment Papers for an application <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition/Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney by Assignee, with Revocation of Former Powers <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After-Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s):
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> <i>Amendment in reply to Office Action</i> <input type="checkbox"/> Affidavit/Declaration(s)		
<input type="checkbox"/> Extension of Time Request		
<input type="checkbox"/> Express Abandonment Request		
<input type="checkbox"/> Information Disclosure Statement		
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts Notice/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<input type="checkbox"/> Check for \$ _____		
<input checked="" type="checkbox"/> Return Receipt Postcard		

RECEIVED

APR 25 2002

Technology Center 2100

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Name	Hoyt A. Fleming III	Date	04/09/2002
Signature	<i>Hoyt A. Fleming III</i>	Telephone	(208) 336-5237
Address	Park, Vaughan & Fleming LLP, P.O. Box 3045, Boise, ID 83703	Facsimile	(208) 342-5363

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the U. S. Postal Service as Express Mail or First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231 on 4/9/2002.

Type or Printed Name	Teresa A. Fleming	Signature	<i>Teresa A. Fleming</i>
----------------------	-------------------	-----------	--------------------------